

Standard: <i>Course Critique Form</i>	
Issue Date: May 5, 2000	Standard ID: <i>S-TR-050</i>
Supersedes: October 8, 1999	Rev/Change 2.0

- 1. Purpose:** To record the trainee's opinion of a course.

- 2. Creating Procedures:**
 - P-TR-020 – Evaluating a Course
 - P-TR-010 - Conducting a Course

- 3. Contents:**
 - a) *Name of Course:* the name of the course that was taught
 - b) *Date:* the date the course was taught
 - c) *Instructor(s):* the name of the instructor
 - d) *Location:* the location where the course was taught
 - e) *Name:* the name of the trainee (Optional)
 - f) *Questions:* answer the questions as directed

- 4. Format:**
 - Following Page

- 5. Notes:** N/A

Name of Course: _____ Date: _____
 Instructor(s): _____ Location: _____
 Name (Optional): _____

Mark boxes which most closely represent your opinions. Please provide suggestions for how we can improve training.

Curriculum/Relevancy

	Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree
1. The content of this course is pertinent to my job assignment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The amount of material the course covers is appropriate for the time allotted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I could explain what I've learned in this course to a co-worker.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Suggested Improvements: _____

Course Materials

4. Training materials were well suited to the course objectives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Training materials were easy to understand.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The exercises helped me learn the material.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Suggested Improvements: _____

Instructor(s)

7. The instructor(s) were knowledgeable of the course content.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. The instructor(s) answered questions thoroughly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. The instructor(s) encouraged class participation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Suggested Improvements: _____

Logistics

10. The size of the class was appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. There were appropriate break times during the presentation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. The facilities were conducive to learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Suggested Improvements: _____

Continue on other side if more room is needed.